Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			75					RATE FE		1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			25 minus 20=		· (s			X\$ 9=		OR	X\$18=	90	
INDEPENDENT CLAIMS			7) minus 3 =		. 0		X42=		 		X84=	10	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT							OR		-	
• 1/	the difference	in column 1 is	less than zero, enter "0" in			miumo 2	+140=		<u> </u>	OR	+280=		
* If the difference in column 1 is less than zero, enter *0" in column 2							1	TOTAL	<u> </u>	OR	TOTAL	830	
CLAIMS AS AMENDED - PART 9/10/04 (Column 1) (Column						(Column 3)	S	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	EST BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 15	Minus	-2	5	=	,	K\$ 9=	·	OR	X\$18=		
	Independent + A		Minus			<u> </u>		X42=		OR	X84=		
	FIRST PRESE	MIATION OF MI	ULTIPLE DE	PENDENT	CLAIM		١,	140=		OR	+280=	·	
	1 1 -							TOTAL DIT. FEE			YOTAL		
(3/2/5	12/5 (Column 1) (Column 2) (Column 3)								JOI 7	ADDIT. FEE		
AMENOMENT B		CLAMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 14	Minus	· 2	5	= -	×	\$ 9=		OR	X\$18=		
	Independent FIRST PRESE	NTATION OF MI	Minus	FNDENT	CLAIM	-	>	(42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	+280=		
										OR ,	TOTAL DOIT. FEE		
		(Column 1)	(Column 3)										
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	er Usly	PRESENT EXTRA	R		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		* ·	x	42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE													
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Application or Docket Number